

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN8306	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 06/28/2017
NAME OF PROVIDER OR SUPPLIER NHC HEALTHCARE, HENDERSONVILLE		STREET ADDRESS, CITY, STATE, ZIP CODE 370 OLD SHACKLE ISLAND RD HENDERSONVILLE, TN 37075		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 000	Initial Comments A Licensure survey and complaint investigation #40690, #40827, and #41088 were completed on 6/26/17-6/28/17 at NHC Healthcare, Hendersonville. No Deficiencies were cited related to the Licensure survey and complaint investigation #40690, #40827, and #41088 under Chapter 1200-8-6, Standards for Nursing Homes.	N 000		
N 415 SS=D	1200-8-6-.04(10) Administration (10) When licensure is applicable for a particular job, verification of the current license must be included as a part of the personnel file. Each personnel file shall contain accurate information as to the education, training, experience and personnel background of the employee. Documentation that references were verified shall be on file. Documentation that all appropriate abuse registries have been checked shall be on file. Adequate medical screenings to exclude communicable disease shall be required of each employee. This Rule is not met as evidenced by: Based on review of facility policy, employee record review, and interview, the facility failed to offer the Hepatitis B vaccination to 4 Employees (#1, #3, #4, #5) of 5 employee records reviewed. The findings included: Review of facility policy, Policy and Procedure for Hepatitis B Vaccination, dated 6/2003 revealed "...At risk partners [employees] must sign a form with accepting or declining Hepatitis B vaccination..."	N 415		

Division of Health Care Facilities
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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N 415	Continued From page 1 Review of the records for Employee #1, hired on 2/27/17; for Employee #3, hired on 6/5/17; for Employee #4, hired on 4/3/17; and for Employee #5, hired on 5/19/17 revealed no documentation the facility offered the Hepatitis B vaccine. Interview with Licensed Practical Nurse #5 on 6/28/17 at 5:10 PM in the classroom confirmed the facility was to offer the Hepatitis B vaccination upon hire and the employee had the option to accept or decline the vaccination. Further interview confirmed the facility failed to offer Employee #1, #3, #4 and #5 the Hepatitis B vaccination.	N 415		
N 643 SS=D	1200-08-06-.06(3)(i) Basic Services (i) A Nursing Home shall have an annual influenza vaccination program which shall include at least: 1. The offer of influenza vaccination to all staff and independent practitioners at no cost to the person or acceptance of documented evidence of vaccination from another vaccine source or facility. The Nursing Home will encourage all staff and independent practitioners to obtain an influenza vaccination; 2. A signed declination statement on record from all who refuse the influenza vaccination for reasons other than medical contraindications (a sample form is available at http://tennessee.gov/health/topic/hcf-provider); 3. Education of all employees about the following: (i) Flu vaccination,	N 643		

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N 643	<p>Continued From page 2</p> <p>(ii) Non-vaccine control measures, and</p> <p>(iii) The diagnosis, transmission, and potential impact of influenza;</p> <p>4. An annual evaluation of the influenza vaccination program and reasons for non-participation; and</p> <p>5. A statement that the requirements to complete vaccinations or declination statements shall be suspended by the administrator in the event of a vaccine shortage as declared by the Commissioner or the Commissioner 's designee.</p> <p>This Rule is not met as evidenced by: Based on employee record review and interview, the facility failed to offer the flu vaccination for 1 employee (#2) of 5 employee records reviewed.</p> <p>The findings included:</p> <p>Review of the record for Employee #2, hired on 1/21/17, revealed the facility failed to offer the flu vaccination.</p> <p>Interview with Licensed Practical Nurse #5 on 6/28/17 at 3:50 PM in the classroom revealed the facility offered the flu vaccination 1 time annually, in September or October, to employees. Further interview confirmed the facility failed to offer the flu vaccination to the employees hired after the September/October annual flu vaccination offer.</p>	N 643		